

**State of Georgia**  
**Department of Motor Vehicle Safety**  
**Motor Vehicle Services**  
**1200 Tradeport Boulevard**  
**Hapeville, Georgia 30354-3724**

**Certification of Inspection by a Duly Constituted City, County  
or State Law Enforcement Officer or County Tag Agent**

This statement is to certify that I have made an examination of the Manufacturer's Identification Plate on the vehicle described below and found the Manufacturer's Identification Number to be:

Manufacturer's Identification Number \_\_\_\_\_

Year Model \_\_\_\_\_ Make \_\_\_\_\_ Body Style \_\_\_\_\_

License Plate Number \_\_\_\_\_ Year and State of Issue \_\_\_\_\_

This certification must be signed and submitted with all applications for Georgia Certificate of Title which are supported by documents other than a Certificate of Title or Statement of Origin.

Date Inspected: \_\_\_\_\_

Signature of Officer: \_\_\_\_\_

Official Title: \_\_\_\_\_

Badge Number: \_\_\_\_\_

Inspecting Officer's Headquarters:

\_\_\_\_\_

\_\_\_\_\_  
(City and State)

\_\_\_\_\_  
(Telephone Number and Area Code)

**All spaces on this form must be completed or it will not be accepted.**  
**Any alteration will automatically void this form.**